



COURSE PROPOSAL

DATE: _____ PHONE: _____

INSTRUCTORS NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL: _____

COURSE INFO

PROPOSED TITLE: _____

CLASS DESCRIPTION: _____

THIS COURSE IS FOR (circle one): All Ages Adults Teens Children

MINIMUM NUMBER OF STUDENTS (NAA suggests at least 4): _____ MAXIMUM: _____

SKILL LEVEL FOR THE COURSE: Beginner Intermediate Advanced All Levels

COURSE DATE (First Choice): _____ START TIME: _____ HOURS PER COURSE: _____

COURSE DATE (Second Choice): _____ START TIME: _____ HOURS PER COURSE: _____

DURATION: One Day _____ or Repeat _____ Weeks or Repeat _____ Days

FEE PER STUDENT: _____

KEEP IN MIND THAT

- NAA RETAINS 30% OF THE STUDENT FEE. INSTRUCTOR RECEIVES 70% OF THE STUDENT FEE.
- STUDENT PAYMENT IS MADE TO THE NORTHPORT ARTS ASSOCIATION THROUGH THE WEBSITE or IN PERSON BY CHECK, CASH OR CHARGE.
- PAYMENT TO INSTRUCTORS FROM THE NAA IS MAILED OR AVAILABLE FOR PICK UP WITHIN 10 BUSINESS DAYS FROM THE END OF THE COURSE.
- INSTRUCTOR MAY HAVE MATERIAL FEES. STUDENTS CAN PAY THEM DIRECTLY AT THE CLASS.

INCLUDE (Required)

- Brief bio (include professional and/or artistic achievements)
- Images to us for class promotion
- Typed supply list and whether you will provide supplies for free or for a fee or prefer students provide their own.

SUBMIT TO:

Email: NorthportArtsAssociation.org
Or Mail: Northport Arts Association
P.O. Box 262
Northport, MI 49670